BEFORE THE PUBLIC UTILITIES COMMISSION OF THE STATE OF HAWAII

1. I, Norman Ahu , have been presented with a copy of
Protective Order No. 22028 issued by the Hawai'i Public Utilities
Commission in Docket No. <u>05-0221</u> on the <u>14th</u> day of <u>September</u> , 2005
("Protective Order").
2. I am employed, retained or assisting the Division of Consumer Advocacy
in Docket No. 05-0221 and have requested review of the confidential information
covered by the Protective Order.
3. I understand the confidential information covered by the Protective Order
is to be used solely to assist <u>the Division of Consumer Advocacy</u> and that
unless otherwise permitted by the Protective Order, I am to make no other use of the
confidential information, nor am I to disclose the confidential information to any other
person.
4. I further understand that at the conclusion of my assistance to
the Division of Consumer Advocacy , I shall account for each copy, extract, note
and summary of, or other document containing any part of such confidential information
to the party claiming confidentiality and I shall abide by the provisions in paragraph 28
of the Protective Order, unless otherwise permitted by paragraphs 29 and 30 of the
Protective Order.

5. I hereby certify that I have read the above-mentioned Protective Order and agree to abide by its terms and conditions.

DATED at_	Honolulu	, <u>Hawaii</u>	this	Bost. 16, 2005.	
			MA	Ma Alla	
			Signatur	e	
			Division	of Consumer Advocacy	
		•		chant Street, Room 326	
		•		ı, Hawaii 96813	
			Address		
			(808)	586-2800	
		,	Telepho	ne Number	

BEFORE THE PUBLIC UTILITIES COMMISSION OF THE STATE OF HAWAII

1. I, <u>Ted Bohlen</u> , have been presented with a copy of
Protective Order No. 22028 issued by the Hawai'i Public Utilities
Commission in Docket No. <u>05-0221</u> on the <u>14th</u> day of <u>September</u> , 2005
("Protective Order").
2. I am employed, retained or assisting the Division of Consumer Advocacy
in Docket No. 05-0221 and have requested review of the confidential information
covered by the Protective Order.
3. I understand the confidential information covered by the Protective Order
is to be used solely to assist <u>the Division of Consumer Advocacy</u> and that
unless otherwise permitted by the Protective Order, I am to make no other use of the
confidential information, nor am I to disclose the confidential information to any other
person.
4. I further understand that at the conclusion of my assistance to
the Division of Consumer Advocacy , I shall account for each copy, extract, note
and summary of, or other document containing any part of such confidential information
to the party claiming confidentiality and I shall abide by the provisions in paragraph 28
of the Protective Order, unless otherwise permitted by paragraphs 29 and 30 of the
Protective Order.

5.	I hereby certify that I have rea	ad the above-mentioned Protective Order and
agree to abid	de by its terms and conditions.	
DATED at	Honolulu , Hawaii	, this, 2005.
		Elland B. Bhlen Signature
		Division of Consumer Advocacy 335 Merchant Street, Room 326 Honolulu, Hawaii 96813 Address
		(808) 586-2800 Telephone Number

BEFORE THE PUBLIC UTILITIES COMMISSION OF THE STATE OF HAWAII

1. I, <u>Marcey Chang</u> , have been presented with a copy of
Protective Order No. 22028 issued by the Hawai'i Public Utilities
Commission in Docket No. <u>05-0221</u> on the <u>14th</u> day of <u>September</u> , 2005
("Protective Order").
2. I am employed, retained or assisting the Division of Consumer Advocacy
in Docket No. 05-0221 and have requested review of the confidential information
covered by the Protective Order.
3. I understand the confidential information covered by the Protective Order
is to be used solely to assist <u>the Division of Consumer Advocacy</u> and that
unless otherwise permitted by the Protective Order, I am to make no other use of the
confidential information, nor am I to disclose the confidential information to any other
person.
4. I further understand that at the conclusion of my assistance to
the Division of Consumer Advocacy , I shall account for each copy, extract, note
and summary of, or other document containing any part of such confidential information
to the party claiming confidentiality and I shall abide by the provisions in paragraph 28
of the Protective Order, unless otherwise permitted by paragraphs 29 and 30 of the
Protective Order.

5.	I hereby certify that I have re	ead the above-mentioned Protective Ord
agree to abi	de by its terms and conditions	3.
DATED at_	Honolulu , Hawaii	, this <u>September 16</u> , 2005.
		Signature Signature
		Division of Consumer Advocacy 335 Merchant Street, Room 326 Honolulu, Hawaii 96813 Address
		(808) 586-2800 Telephone Number

BEFORE THE PUBLIC UTILITIES COMMISSION OF THE STATE OF HAWAII

1. I, John E. Cole , have been presented with a copy of
Protective Order No. 22028 issued by the Hawai'i Public Utilities
Commission in Docket No. <u>05-0221</u> on the <u>14th</u> day of <u>September</u> , 2005
("Protective Order").
2. I am employed, retained or assisting the Division of Consumer Advocacy
in Docket No. 05-0221 and have requested review of the confidential information
covered by the Protective Order.
3. I understand the confidential information covered by the Protective Order
is to be used solely to assist <u>the Division of Consumer Advocacy</u> and that
unless otherwise permitted by the Protective Order, I am to make no other use of the
confidential information, nor am I to disclose the confidential information to any other
person.
4. I further understand that at the conclusion of my assistance to
the Division of Consumer Advocacy , I shall account for each copy, extract, note
and summary of, or other document containing any part of such confidential information
to the party claiming confidentiality and I shall abide by the provisions in paragraph 28
of the Protective Order, unless otherwise permitted by paragraphs 29 and 30 of the
Protective Order.

5. I hereby certify that I have read the above-mentioned Protective Order and agree to abide by its terms and conditions.

DATED at Honolulu , Hawaii , this Sep. 15, 2005.

Signature

Division of Consumer Advocacy
335 Merchant Street, Room 326
Honolulu, Hawaii 96813
Address

(808) 586-2800 Telephone Number

BEFORE THE PUBLIC UTILITIES COMMISSION OF THE STATE OF HAWAII

1. I, <u>Jon S. Itomura</u> , have been presented with a copy of
Protective Order No. 22028 issued by the Hawai'i Public Utilities
Commission in Docket No. <u>05-0221</u> on the <u>14th</u> day of <u>September</u> , 2005
("Protective Order").
2. I am employed, retained or assisting the Division of Consumer Advocacy
in Docket No. 05-0221 and have requested review of the confidential information
covered by the Protective Order.
3. I understand the confidential information covered by the Protective Order
is to be used solely to assist <u>the Division of Consumer Advocacy</u> and that
unless otherwise permitted by the Protective Order, I am to make no other use of the
confidential information, nor am I to disclose the confidential information to any other
person.
4. I further understand that at the conclusion of my assistance to
the Division of Consumer Advocacy , I shall account for each copy, extract, note
and summary of, or other document containing any part of such confidential information
to the party claiming confidentiality and I shall abide by the provisions in paragraph 28
of the Protective Order, unless otherwise permitted by paragraphs 29 and 30 of the
Protective Order

DATED at Honolulu , Hawaii , this Signature

Division of Consumer Advocacy
335 Merchant Street, Room 326
Honolulu, Hawaii 96813
Address

(808) 586-2800

5.

agree to abide by its terms and conditions.

I hereby certify that I have read the above-mentioned Protective Order and

Telephone Number

5.	I hereby certify that I h	nave read the abo	ve-mentioned Protective Order and
agree to abi	de by its terms and con	ditions.	
DATED at_	Honolulu , H	awaii, this	<u>byt 19</u> , 2005.
		<u></u>	yl & Kikuta
		335 Mer	of Consumer Advocacy chant Street, Room 326 , Hawaii 96813
		<u>(808)</u> Telephor	586-2800 ne Number

BEFORE THE PUBLIC UTILITIES COMMISSION OF THE STATE OF HAWAII

1. I, <u>Michael Murashige</u> , have been presented with a copy of
Protective Order No. 22028 issued by the Hawai'i Public Utilities
Commission in Docket No. <u>05-0221</u> on the <u>14th</u> day of <u>September</u> , 2005
("Protective Order").
2. I am employed, retained or assisting the Division of Consumer Advocacy
in Docket No. 05-0221 and have requested review of the confidential information
covered by the Protective Order.
3. I understand the confidential information covered by the Protective Order
is to be used solely to assist <u>the Division of Consumer Advocacy</u> and that
unless otherwise permitted by the Protective Order, I am to make no other use of the
confidential information, nor am I to disclose the confidential information to any other
person.
4. I further understand that at the conclusion of my assistance to
the Division of Consumer Advocacy , I shall account for each copy, extract, note
and summary of, or other document containing any part of such confidential information
to the party claiming confidentiality and I shall abide by the provisions in paragraph 28
of the Protective Order, unless otherwise permitted by paragraphs 29 and 30 of the
Protective Order.

5.	I hereby certify that I have read the above-mentioned Protective Order and				
agree to al	oide by its terms and conditions.				
DATED at	Honolulu , Hawaii	, this <u>Syst 16</u> , 2005.			
		On whael Ohusshige Signature			
		Division of Consumer Advocacy 335 Merchant Street, Room 326 Honolulu, Hawaii 96813 Address			
		(808) 586-2800 Telephone Number			

BEFORE THE PUBLIC UTILITIES COMMISSION OF THE STATE OF HAWAII

 I, <u>Dean Nishina</u>, have been presented with a copy of
Protective Order No. 22028 issued by the Hawai'i Public Utilities
Commission in Docket No. <u>05-0221</u> on the <u>14th</u> day of <u>September</u> , 2005
("Protective Order").
2. I am employed, retained or assisting the Division of Consumer Advocacy
in Docket No. 05-0221 and have requested review of the confidential information
covered by the Protective Order.
3. I understand the confidential information covered by the Protective Order
is to be used solely to assist the Division of Consumer Advocacy and that
unless otherwise permitted by the Protective Order, I am to make no other use of the
confidential information, nor am I to disclose the confidential information to any other
person.
4. I further understand that at the conclusion of my assistance to
the Division of Consumer Advocacy, I shall account for each copy, extract, note
and summary of, or other document containing any part of such confidential information
to the party claiming confidentiality and I shall abide by the provisions in paragraph 28
of the Protective Order, unless otherwise permitted by paragraphs 29 and 30 of the
Protective Order.

i nereby certify that I have rea	ad the above-mentioned Protective Orde
de by its terms and conditions.	
Honolulu , Hawaii	, this <u>September 16</u> , 2005.
	Dean Not
	Signature
	Division of Consumer Advocacy
	335 Merchant Street, Room 326
	Honolulu, Hawaii 96813 Address
	Address
	(808) 586-2800
	Telephone Number
	de by its terms and conditions.

BEFORE THE PUBLIC UTILITIES COMMISSION OF THE STATE OF HAWAII

1. I, <u>Brysen Poulton</u> , have been presented with a copy of
Protective Order No. 22028 issued by the Hawai'i Public Utilities
Commission in Docket No. <u>05-0221</u> on the <u>14th</u> day of <u>September</u> , 2005
("Protective Order").
2. I am employed, retained or assisting the Division of Consumer Advocacy
in Docket No. 05-0221 and have requested review of the confidential information
covered by the Protective Order.
3. I understand the confidential information covered by the Protective Order
is to be used solely to assist <u>the Division of Consumer Advocacy</u> and that
unless otherwise permitted by the Protective Order, I am to make no other use of the
confidential information, nor am I to disclose the confidential information to any other
person.
4. I further understand that at the conclusion of my assistance to
the Division of Consumer Advocacy , I shall account for each copy, extract, note
and summary of, or other document containing any part of such confidential information
to the party claiming confidentiality and I shall abide by the provisions in paragraph 28
of the Protective Order, unless otherwise permitted by paragraphs 29 and 30 of the
Protective Order.

agree to abid	le by its terms and o	conditions.		
DATED at	Honolulu ,	Hawaii	_, this <u>-</u>	Sept. 19th, 2005.
			Ma	W fores
			ígnæfture	of Consumer Advocacy
		3: <u>H</u>	35 Merc Ionolulu,	hant Street, Room 326 Hawaii 96813
		А	ddress	
			308) elephon	<u>586-2800</u> e Number

5.

I hereby certify that I have read the above-mentioned Protective Order and

5.		I hereby certify that I have re-	ad the above-mentioned Protective Order and
agree to	abio	de by its terms and conditions.	
DATED	at	Honolulu , Hawaii	, this <u>September 15</u> , 2005.
			Signature
			Signature
			Division of Consumer Advocacy
			335 Merchant Street, Room 326
			Honolulu, Hawaii 96813
			Address
			(808) 586-2800
			(808) 586-2800 Telephone Number

5.	I hereby certify tha	t I have read the above-mentioned Protective Order and
agree to abi	de by its terms and o	conditions.
DATED at_	Honolulu,	Hawaii , this Sept 22 , 2005.
		Signature Signature
		Division of Consumer Advocacy 335 Merchant Street, Room 326 Honolulu, Hawaii 96813 Address
		(808) 586-2800 Telephone Number

5.	I hereby certify that I have rea	ad the above-mentioned Protective Order
agree to ab	oide by its terms and conditions.	
DATED at_	Honolulu , Hawaii	, this <u>September 22</u> , 2005.
		Signature
		Division of Consumer Advocacy 335 Merchant Street, Room 326 Honolulu, Hawaii 96813 Address
		(808) 586-2800 Telephone Number

and

BEFORE THE PUBLIC UTILITIES COMMISSION OF THE STATE OF HAWAII

1. I, Sandra Yonesaki, nave been presented with a copy of			
Protective Order No. 22028 issued by the Hawai'i Public Utilities			
Commission in Docket No. <u>05-0221</u> on the <u>14th</u> day of <u>September</u> , 2005			
("Protective Order").			
2. I am employed, retained or assisting the Division of Consumer Advocacy			
in Docket No. 05-0221 and have requested review of the confidential information			
covered by the Protective Order.			
3. I understand the confidential information covered by the Protective Order			
is to be used solely to assist <u>the Division of Consumer Advocacy</u> and that			
unless otherwise permitted by the Protective Order, I am to make no other use of the			
confidential information, nor am I to disclose the confidential information to any other			
person.			
4. I further understand that at the conclusion of my assistance to			
the Division of Consumer Advocacy , I shall account for each copy, extract, note			
and summary of, or other document containing any part of such confidential information			
to the party claiming confidentiality and I shall abide by the provisions in paragraph 28			
of the Protective Order, unless otherwise permitted by paragraphs 29 and 30 of the			
Protective Order.			

5. agree to abid	I hereby certify that I have r	read the above-mentioned Protective Order and s.
DATED at	Honolulu , Hawaii	, this <u>Sept. 19</u> , 2005.
		Dandu Gresolii Signature
		Division of Consumer Advocacy 335 Merchant Street, Room 326 Honolulu, Hawaii 96813 Address
		(808) 586-2800 Telephone Number